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10.70 ERYTHEMA INFECTIOSUM (Fifth Disease)

Erythema infectiosum is a moderately contagious exanthematous disease affecting mainly children. It is frequently called fifth disease because it was the 5th illness described with a somewhat similar rash. The first 4 diseases were rubella, measles, scarlet fever, and Filatov-Dukes disease. The last of these is now considered a mild atypical form of scarlet fever.

Etiology. A viral etiology has been postulated. In 1 epidemic approximately 10% of the patients studied had evidence of rubella infection. A strain of rubella virus isolated from 1 of these patients produced an exanthem resembling erythema infectiosum in adult volunteers. However, study of 2 recent epidemics failed to show any association with rubella virus, and previous rubella vaccination did not decrease the incidence of erythema infectiosum. In most patients studied, no laboratory evidence for a viral disease could be detected.

Pathology. Biopsy of the skin lesion shows edema and a nonspecific inflammatory infiltrate of lymphocytes.

Epidemiology. Infants and adults are affected infrequently. There is no sex predilection. The incubation period has been estimated from family studies to range from 7-28 days (average, 16 days). Community epidemics involving mainly school-age children have been described. Distribution is worldwide.

Clinical Manifestations. There are usually no prodromal symptoms. Fever is absent or low grade. The characteristic rash appears in 3 stages. The illness usually begins with the sudden appearance of livid erythema of the cheeks which gives the child a "slapped-cheek" appearance. An erythematous maculopapular rash then appears on the trunk and extremities. However, the body rash may precede the facial rash. The rash fades with central clearing, giving a lacy or reticulated appearance (fig 10-16 [p. xxxiii]), which is the most distinctive part of the disease. The rash lasts from 2-39 days (mean, 11 days). It is frequently pruritic. It resolves without desquamation, but periodic recrudescences may occur with exercise, warm baths, rubbing of the skin, or emotional upset. Constitutional symptoms such as headache, pharyngitis, coryza, and gastrointestinal disturbance are more frequent and more severe in adults.

Laboratory Data. There are no confirmatory laboratory tests.

Diagnosis. Erythema infectiosum must be differentiated from rubella, enteroviral diseases, systemic lupus erythematosus, atypical measles, and drug rashes.

Complications. Complications are rare. Arthritis, hemolytic anemia, pneumonitis, and encephalopathy have been reported.

Treatment. No treatment is indicated. Isolation is not required. Since the duration of the rash may be prolonged and the illness is mild, children with this disease should be allowed to attend school.

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10.71 HERPES SIMPLEX

Herpesvirus hominis (HVH) is a common parasite of man with a variety of clinical manifestations involving the skin, mucous membranes, eye, central nervous system, and genital tract. It also causes generalized systemic disease. Two strains of virus (HVH-1 and HVH-2) have differing biologic and serologic properties, HVH-1 commonly infecting skin and mucous membranes, HVH-2 infecting primarily the genitalia.

Two forms of infection are recognized: (1) Primary: this is the susceptible host's 1st experience with the virus, which results in most instances in a subclinical infection; the remainder of patients usually have local superficial lesions (see below) accompanied by varying degrees of systemic reaction. In newborn infants and severely malnourished infants, a fatal systemic infection, often without superficial lesions, may occur. Circulating antibodies develop in nonfatal cases. (2) Recurrent herpetic lesions are the result of reactivation of a latent infection in an immune host with circulating antibodies. Reactivation follows such nonspecific stimuli as changes in the external milieu (e.g., cold, ultraviolet light) or the internal milieu (e.g., menstruation, fever, or emotional stress). The lesions are localized and, generally, not associated with systemic reaction.

CLINICAL PATTERNS

Systemic Infection

In the Newborn Infant. Most neonatal herpes is caused by HVH-2 virus acquired by passage of the infant through an infected birth canal or ascension of virus into the uterine cavity after rupture of membranes. Occasionally HVH-1 infection occurs, possibly due to transplacentally or postnatally acquired infection. The true incidence of neonatal herpetic disease is not known. Since most of the early reports were based on

DISTRIBUTION OF STATE GENERAL HEALTH FUNDS
TO LOCAL HEALTH DEPARTMENTS
YEAR ENDED JUNE 30, 1984

Local Health Department	Population	Actual Expenditures	State General Health Funds	State General funds as a Percentage of Total Expenditures	Percentage of all State General Health Funds to LHD	State General Health Funds Per Capita
Bear River District	101,550	\$ 998,305	\$ 130,753	13.1%	11.2%	\$1.29
Central Utah District	53,100	518,901	167,513	32.3	14.3	3.15
Southeastern District	57,600	1,346,292	163,770	12.2	14.0	2.84
Southwestern District	62,550	1,066,024	167,189	15.7	14.3	2.67
Uintah Basin District	39,450	384,549	125,794	32.7	10.8	3.19
Weber-Morgan District	158,200	1,406,468	111,931	8.0	9.6	.71
Davis County	160,800	1,301,264	43,885	3.4	3.8	.27
Salt Lake City-County	666,000	6,252,660	167,485	2.7	14.3	.25
Summit County	11,700	326,888	7,088	2.2	.6	.61
Tooele County	27,000	262,194	12,425	4.7	1.1	.46
Utah City-County	240,700	1,445,029	61,308	4.2	5.2	.25
Wasatch County	8,850	129,799	8,909	6.9	.8	1.01
	<u>1,587,500</u>	<u>\$15,438,373</u>	<u>\$1,168,050</u>	<u>7.6%</u>	<u>100 %</u>	<u>\$.74</u>

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Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Ross B. Elliott, Division Director

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Dr. Green

July 9, 1984

Phil Wright
County Board of Health
55 West Center
Heber City, UT 84032

Dear Mr. Wright:

In The Park Board will again discuss the Deer Creek General Management proposal at its regularly scheduled meeting on August 10 at the Natural History of Museum in Vernal, Utah at 9:00 a.m.

The Board would appreciate your attendance (or your representative) at this meeting.

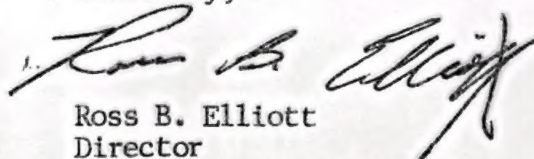
At the last public meeting on this issue the concessionaires and their clientele were quite vocal in their disapproval of several aspects of the proposed plan. Before the Park Board makes a decision on the plan, they would appreciate hearing from you to clarify the current conditions surrounding the reservoir and to solicit your position on the plan itself.

If you or your representative are unable to attend this meeting, please forward any additional comments you might have to:

Ken Travous
1636 West North Temple
Salt Lake City, UT 84116

Written comments will be read into the minutes of the meeting. We appreciate your input into this proposal and hope to see you in Vernal.

Sincerely,


Ross B. Elliott
Director

doc

Operations Permits Required for Food Establishments

Wave 16 July 1984

The Wasatch City-County Health Department in cooperation with the Wasatch County Commission, the Heber City Council and the Town Councils of Midway, Charleston and Wallsburg have enacted an ordinance requiring all food establishments operating in the City-County health department jurisdiction to obtain an operational permit to conduct food service operations.

According to Phil Wright, health officer for the Wasatch City-County Health Department, the regulations was mainly enacted to better control sanitation and handling of foods at public gatherings such as city and county celebrations.

Wright said that there is "a very widespread lack of understanding of state and county laws regulating food sanitation," noting that

temporary establishments such as celebration food stands have just as much responsibility to comply with health requirement permanent facilities.

Potentially hazardous food require very limited preparation; such as hamburgers, and fraters can be prepared and served. Even the hamburger patties be prepared in an commercial establishment and kept below degrees so that all that is required at the temporary food establishment is removal of the hamburger patty from the refrigerator placement of it onto the grill.

Mr. Wright said, "We hope this regulation will help prevent incidents where hazardous food might be served to the public which could result in poisoning incidents."

Foods served in restricted

Clifton Brereton

Clifton Hooks Brereton, 71, of Payson died Sunday, June 24, 1984 in Orem.

He was born Sept. 17, 1912 in Provo to John Austin and Sarah Jane Cook Ashton Brereton. He married Elaine Cook on June 1, 1938 in Orem. She died Dec. 16, 1982. He later married Opal Lee-atham on Oct. 6, 1983 in Elko, Nev.

He was educated in Provo and Orem schools. He was a member of The Church of Jesus Christ of Latter-day Saints. He served on the Strawberry Water Users Association as canal rider for 20 years. He was a farmer and fruit grower in the Payson area.

Survivors include his wife of Springlake; two sons and two daughters; Dee Brereton, Santaquin; Mrs. Alvin (Janet) Roberts, Springville; John Brereton, Spanish Fork; and Mrs. Ken (Sheri) Talbot, Lake Shore. One step-daughter, Mrs. Del (June) Feddis of Wenatchee, Wash.; 20 grandchildren and six great-grandchildren; four brothers and one sister; Morris Brereton, Mrs. Max (Lucille) Phillips, Lynn Brereton, Kenneth Brereton and Rulon Brereton, all of Provo.

Services will be Wednesday at 11am in the Springlake LDS Ward church. Friends may call at Walker Mortuary, 587 S 100 W in Payson, on Tuesday 7-9pm or at the church on Wednesday one hour prior to services. Burial will be in the Provo City cemetery.



Clifton Brereton

closed groups such as a family reunion, church gatherings, club food good served. charged ablishment for lar fee nanent mit is hment

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Published in the Wasatch Wave July 19, 26, and August 2, 1984.

HEBER CITY ORDINANCE NO. 84-119
WASATCH COUNTY ORDINANCE NO. 84-2

AN ORDINANCE REQUIRING OPERATIONAL PERMITS FOR FOOD SERVICE OPERATIONS WITHIN ALL OF WASATCH COUNTY, STATE OF UTAH

BE IT ORDAINED

by the Wasatch City-County Board of Health, the Board of County Commissioners of Wasatch County and the City Councils of Heber City and Midway City and the Town Boards of Charleston and Wallsburg, as follows:

SECTION I: No person or persons shall operate a food service establishment within Wasatch County and its municipalities unless they possess a valid food service permit issued to them by the Wasatch City-County Health Department.

SECTION II: Food service permits shall not be transferable from one person or place to another person or place.

SECTION III: A valid permit shall be posted in a conspicuous place in each food service establishment.

SECTION IV: Permits for permanent food service establishments are good until revoked.

SECTION V: Permits for temporary food service establishments shall be issued for a time not to exceed fourteen (14) days.

SECTION VI: Temporary food establishments must meet sanitation requirements of the temporary food establishment section as outlined in the State of Utah Food Service Sanitation Regulations, and by additional requirements as determined by the Wasatch City-County Board of Health.

SECTION VII: A fee for each operational permit shall be paid to the Wasatch City-County Health Department, as follows:

Food Service Establishment - \$20.00
Temporary Food Service Establishment - \$5.00

SECTION VIII: Operational permits shall not be issued to any applicant who has not complied with health laws and regulations of the State of Utah and the Wasatch City-County Board of Health.

SECTION IX: The Board of Health is authorized to revoke operational permits on a five day written notice to any person or persons not complying with and meeting the

laws and regulations of the State of Utah and the Wasatch City-County Board of Health. In the case of temporary food establishments, all violations shall be corrected immediately. If violations are not corrected, the establishment shall immediately cease food service operations until authorized to do so by the local health officer.

SECTION X: Any person, association, or corporation or the officers who violates this ordinance is, on the first violation, guilty of a Class B misdemeanor, and on subsequent similar violation within two years, guilty of a Class A misdemeanor. In addition such person, association, or corporation or the off-

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Wave 26 July 1984